LOZ 0000 120'

LLC Filing Letter

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Date: April 1, 2002

LLC Filings Office:

100005506291---05/13/02--01065--002 ****125.00 ****125.0

I enclose an original and one (1) copy of the proposed Articles of Organization of TLC for Special Needs, LLC, a proposed domestic limited liability company.

Please file the Articles of Organization and return a certificate of formation, file-stamped copy of the original document or other receipt, acknowledgment or proof of filing to me at the address shown below my signature.

Payment for the required fees is enclosed.

Sincerely,

eresa H. Murres Signed:

Teresa M Murrer 830 Magnolia Shores Drive Niceville, FL 32578

Telephone: 850 678-2700

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Article I - Name:			
The name of the Limited Liability Company is:			
TLC for Special Needs, LLC			
Article II - Address:	A I	82	
The mailing address and street address of the principal office of the Limited Liability Company	CRE	=	
830 Magnolia Shores Drive, Niceville, FL 32578	TARY	17 13	
Article III - Registered Agent, Registered Office, & Registered Agent's Signature:	FIG.	足	
The name and the Florida street address of the registered agent are:	LORI		
Teresa M Murrer	DA 3	5	
Name	-		
830 Magnolia Shores Drive, Niceville, FL 32578 Florida street address (P.O. Box NOT Acceptable)			
company at the place designated in this certificate, I hereby accept the appointment as ragree to act in this capacity. I further agree to comply with the provisions of all statutes reand complete performance of my duties, and I am familiar with and accept the obligation registered agent as provided for in Chapter 608, F.S Olload I. Mandall Agent's Signature	elating to	the j	proper
Article IV - Management: (Check box if applicable.)			
[] The Limited Liability Company is to be managed by one manager or more managers and manager-managed company.	l is, there	efore,	a
(An additional article must be added if an effective date is requested)			
Deresal Muna			
Signature of a member or an authorized representative of a mem	ıber.	_	
(In accordance with Section 608.408(3), Florida Statutes, the execution document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	n of this		
Teresa M Murrer			
Typed or printed name of signee			

FILING FEES:

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (OPTIONAL)

\$ 5.00 Certificate of Status (OPTIONAL)